

ORIGINAL

SMOKING AND CANCER

By

C. EVERETT KOOP, MD, ScD

SURGEON GENERAL

OF THE

U. S. PUBLIC HEALTH SERVICE



DUBLIN, IRELAND

(GREETINGS TO HOSTS, GUESTS, FRIENDS, ETC.)

DURING MY TIME AS SURGEON GENERAL, I'VE BEEN GIVEN A NUMBER OF COMPLEX ASSIGNMENTS, HAVING TO DO WITH THE TREATMENT OF HANDICAPPED CHILDREN, THE TRANSPLANTATION OF MAJOR ORGANS, THE IMPROVEMENT OF THE NATIONAL BLOOD SUPPLY...AND NOW, AIDS.

BUT ONE ISSUE WAS WAITING FOR ME WHEN I FIRST TOOK UP MY POSITION AND IT'S BEEN PART OF MY DAILY AGENDA FOR THE PAST 6 YEARS.

THAT ISSUE IS...SMOKING.

DURING THE PAST 6 YEARS, I'VE BEEN IN THE FOREFRONT OF THE CAMPAIGN TO REDUCE THE LEVEL OF SMOKING IN OUR SOCIETY -- IF NOT ELIMINATE IT ALTOGETHER.

AT FIRST, I HAD THE ASSIGNMENT SIMPLY BECAUSE IT BELONGED IN MY OFFICE. I HAD NO CHOICE IN THE MATTER. BUT NOW, AFTER BEING IMMERSED IN THE ISSUE FOR A NUMBER OF YEARS, AND AFTER CLOSELY OBSERVING JUST HOW THE CIGARETTE INDUSTRY WORKS, I'M KEEPING THE ASSIGNMENT BY CHOICE.

IN FACT, IN ADDITION TO MY OWN ANNUAL REPORTS ON SMOKING AND HEALTH, I ANNOUNCED THE GOAL OF MAKING THE UNITED STATES A SMOKE-FREE SOCIETY BY THE YEAR 2000. AND SINCE THEN, I AM PLEASED TO REPORT, OTHER HEALTH MINISTERS IN OTHER ENLIGHTENED NATIONS HAVE VOICED THE SAME HOPE FOR THEIR PEOPLES AS WELL.

I ANNOUNCED THAT GOAL 3 YEARS AGO. AND FRANKLY I WASN'T SURE IF IT COULD BE ACHIEVED IN MY COUNTRY.

BUT I FEEL MUCH MORE SECURE ABOUT IT TODAY. THE RESPONSE FROM AVERAGE AMERICANS -- THE PEOPLE AT THE "GRASS ROOTS," AS WE SAY -- HAS BEEN VERY POSITIVE AND VERY STRONG.

MANY VOLUNTARY AND PROFESSIONAL ASSOCIATIONS -- INCLUDING ALL THE MAJOR ONES IN MEDICINE AND PUBLIC HEALTH -- PLUS LITERALLY MILLIONS OF ORDINARY CITIZENS HAVE TAKEN UP THE CHALLENGE OF MAKING AMERICA SMOKE-FREE BY THE YEAR 2000.

HOW COULD THIS HAVE HAPPENED?

THE ANSWER LIES IN THE MASSIVE FOUNDATION OF RESEARCH...AN ACCUMULATION OF 30 YEARS' WORTH OF SOLID DATA ON THE HAZARDS OF SMOKING.

BIOMEDICAL RESEARCHERS, PHYSICIANS, AND PUBLIC HEALTH PERSONNEL IN OVER 80 COUNTRIES HAVE GENERATED MORE THAN 50,000 STUDIES ON SMOKING AND HEALTH. ABOUT 2,000 MORE ARE ADDED EACH YEAR.

I CALL IT OUR "EMBARRASSMENT OF RICHES."

AND THE OVERWHELMING MAJORITY OF ALL THESE STUDIES CONCLUDE THAT CIGARETTE SMOKING EITHER IS A CONTRIBUTING CAUSE OR IS THE PRIMARY CAUSE OF ILLNESS AND DEATH.

THANKS TO THE RESEARCH OF THE PAST 30 YEARS...

WE KNOW...THAT A PERSON WHO SMOKES HAS A RISK OF SUDDEN CARDIAC DEATH THAT IS 3 TIMES THE RISK OF THE PERSON WHO DOES NOT SMOKE.

WE KNOW... THAT ABOUT 85 PERCENT OF ALL LUNG CANCERS IN THE UNITED STATES ARE CAUSED BY CIGARETTE SMOKING. PEOPLE WHO SMOKE A COUPLE OF PACKS A DAY HAVE A LUNG CANCER DEATH RATE THAT IS AS MUCH AS 25 TIMES GREATER THAN THE RATE FOR PEOPLE WHO DON'T SMOKE AT ALL.

WE KNOW... THAT CIGARETTE SMOKING IS THE MAJOR CAUSE OF CHRONIC OBSTRUCTIVE LUNG DISEASE, ESPECIALLY EMPHYSEMA AND CHRONIC BRONCHITIS. IN FACT, EMPHYSEMA IS QUITE COMMON AMONG OLDER PEOPLE WHO'VE SMOKED, BUT IT'S RARELY FOUND AMONG OLDER NON-SMOKERS.

AND WE KNOW... THAT WOMEN WHO ARE PREGNANT HAVE AN INCREASED RISK OF DELIVERING THEIR BABIES PREMATURELY...OR OF ABORTING THE FETUS SPONTANEOUSLY...OR OF DELIVERING A STILLBORN CHILD...OR OF GIVING BIRTH TO A CHILD WHO IS UNABLE TO SURVIVE MORE THAN A FEW DAYS OUTSIDE THE WOMB.

THOSE ARE FACTS THAT HAVE BEEN GENERATED SINCE 1964 BY FIVE SURGEONS GENERAL AND ME -- THE SIXTH TO CARRY ON THIS WORK. THE FACTS HAVE BEEN PUBLISHED IN 18 OFFICIAL REPORTS IN THE PAST 23 YEARS.

I SAY THAT THE SCIENTIFIC CASE AGAINST CIGARETTES IS AIR-TIGHT.

AND I AM JOINED IN THAT OPINION BY THE VAST MAJORITY OF THE MEN AND WOMEN IN MEDICINE AND PUBLIC HEALTH TODAY, NOT JUST IN THE UNITED STATES...BUT AROUND THE WORLD.

THE WORLD HEALTH ORGANIZATION HAS BEEN COLLECTING THIS KIND OF DATA FOR SEVERAL YEARS. WHERE SMOKING IS PREVALENT...DISEASE IS PREVALENT, ALSO. EVEN CUBA, OF ALL PLACES, WHERE TOBACCO HAS BEEN AN IMPORTANT CASH CROP FOR CENTURIES...EVEN CUBA HAS REPORTED TO THE W.H.O. THAT SMOKING-RELATED DISEASES ACCOUNT FOR 30 PERCENT OF ALL PREMATURE DEATHS ANNUALLY.

AND BY THE WAY, IT'S NO ACCIDENT THAT THE W.H.O. PROGRAM IS CALLED AN "ACTION PROGRAMME ON TOBACCO OR HEALTH."

AS I SAY, THE PUBLIC HEALTH CASE AGAINST SMOKING IS AIR-TIGHT, BUT IS HAS SO FAR DEALT MAINLY WITH THE HEALTH RISKS OF PEOPLE WHO SMOKE, THE SO-CALLED MAINSTREAM SMOKERS WHO INHALE SMOKE DIRECTLY FROM THE CIGARETTE.

HOWEVER, BEHIND THE CLOUD OF MAINSTREAM SMOKE IS NO SILVER LINING BUT ANOTHER CLOUD...AND IT'S KNOWN AS SIDESTREAM SMOKE, THE CIGARETTE SMOKE THAT NON-SMOKERS INHALE INVOLUNTARILY FROM THE AMBIENT AIR.



RESEARCH IN SIDESTREAM SMOKE HAS EVOLVED SLOWLY BUT STEADILY OVER THE PAST 10 YEARS SO THAT, BY NOW, WE HAVE A PRETTY GOOD IDEA OF ITS EFFECTS. AND WE PUBLISHED THOSE DATA AND OUR CONCLUSIONS IN THE 18<sup>TH</sup> SURGEON GENERAL'S REPORT ON SMOKING AND HEALTH, WHICH WE RELEASED IN DECEMBER OF 1986.

THAT REPORT INDICATES, FOR EXAMPLE, THAT...

THE CHILDREN OF PARENTS WHO SMOKE HAVE A MUCH HIGHER U.R.I. RATE, COMPARED TO CHILDREN WHOSE PARENTS DO NOT SMOKE.

"SIDESTREAM" SMOKERS EXPOSED TO OTHER PEOPLES' HEAVY SMOKING IN THE SAME WORK-SPACE ABSORB AS MUCH SMOKE AS IF THEY THEMSELVES WERE "MAINSTREAM" SMOKING TWO OR THREE CIGARETTES PER DAY.

AND "SIDESTREAM" SMOKE ITSELF CAN CAUSE DISEASE, INCLUDING LUNG CANCER, IN OTHERWISE HEALTHY NON-SMOKERS. FOR EXAMPLE, THE RESEARCH SO FAR INDICATES THAT THE NON-SMOKING WIFE OF A SMOKER RUNS A HIGHER RISK OF LUNG CANCER THAN DOES THE NON-SMOKING WIFE OF A NON-SMOKER. AND THE NEW RESEARCH NOW IN THE PIPELINE WILL UNDOUBTEDLY SHOW THAT NON-SMOKING WIVES OF SMOKERS ARE AT A HIGHER RISK FOR HEART DISEASE, EMPHYSEMA, AND CONGESTIVE LUNG DISEASES AS WELL.

THAT'S THE "BAD NEWS." IS THERE ANY "GOOD NEWS"? YES, THERE IS.

WE CAN TAKE SOME COMFORT IN THE FACT THAT CIGARETTE CONSUMPTION IN THE UNITED STATES IS GOING DOWN. AS A MATTER OF FACT, PER CAPITA CONSUMPTION IS AT ITS LOWEST POINT IN ABOUT 40 YEARS...ABOUT 2,500 CIGARETTES PER CAPITA PER YEAR.

NOT AS GOOD AS IRELAND, I UNDERSTAND, WHICH HAS A LEVEL OF ABOUT 1,800 CIGARETTES PER CAPITA PER YEAR. BUT STILL, NOT BAD...AND IT IS DECLINING.

AND THAT DROP IN CONSUMPTION HAS OCCURRED DESPITE AN ENORMOUS INDUSTRY BUDGET FOR ADVERTISING AND PROMOTION: WELL OVER \$2.1 BILLION A YEAR, I AM TOLD BY EXPERTS IN THE ADVERTISING INDUSTRY.

WHILE THE SUCCESS RATE FOR QUITTERS IS NOT OVERWHELMING, THE SMOKING POPULATION IN THE UNITED STATES HAS NEVERTHELESS DROPPED FROM 42 PERCENT TO LESS THAN 29 PERCENT OF THE POPULATION AS A WHOLE.

BUT MORE IMPORTANT THAN JUST THESE RAW FIGURES IS THE FACT THAT THE TREND LINES ARE DOWN ACROSS ALL AGE GROUPS AND FOR BOTH SEXES. I'M VERY ENCOURAGED BY THE CONTINUED DROP AMONG TEEN-AGERS. AND THAT'S A VEYR GOOD SIGN. THAT'S THE FUTURE.

THE ONLY DISCOURAGING SIGN IS THE FACT THAT THE DECREASE AMONG WOMEN IS VERY SLIGHT...IN FACT, IT'S BARELY PERCEPTIBLE. AND THAT MAY EXPLAIN WHY LUNG CANCER IS NOW THE LEADING CAUSE OF CANCER DEATHS AMONG WOMEN...NOT BREAST CANCER BUT LUNG CANCER...AND IT WILL PROBABLY CONTINUE TO BE THE LEADING CAUSE FOR MANY YEARS TO COME.

AND THAT'S A SHAME.

PEOPLE WHO SMOKE PLACE A LARGE BURDEN UPON THEMSELVES, THEIR FAMILIES, AND THEIR SOCIETY.

FOR EXAMPLE, I WAS IN TEXAS JUST A FEW WEEKS AGO AND THE PEOPLE IN THAT STATE ESTIMATE THAT SMOKING ADDS ABOUT \$1.2 BILLION TO THEIR OVERALL ANNUAL DIRECT COSTS OF MEDICAL CARE.

THEY ALSO ESTIMATE THAT THE STATE COMES UP SHORT ANOTHER \$1.7 BILLION AS A RESULT OF LOST INCOME AND PRODUCTIVITY BECAUSE OF SMOKING-RELATED MORBIDITY AND PREMATURE DEATH.

NATIONALLY WE PUT THE FIGURE NOW AT ABOUT \$65 BILLION FOR BOTH DIRECT MEDICAL COSTS AND THE INDIRECT COSTS OF LOST INCOME AND PRODUCTIVITY. AS A RULE OF THUMB, WE NOW SAY THAT SMOKING ACCOUNTS FOR ABOUT 25 PERCENT OF THE TOTAL DIRECT PERSONAL HEALTH CARE EXPENDITURES RELATED TO NEOPLASMS AND DISEASES OF THE CIRCULATORY AND RESPIRATORY SYSTEMS.

SO THE TREND LINES FOR CIGARETTE CONSUMPTION MAY BE GOING DOWN, BUT WE ARE FAR FROM THE DAY WHEN WE CAN FEEL SMUG ABOUT HOW WELL WE'VE DONE. THERE'S STILL A VERY BIG JOB LEFT TO BE DONE.

WHAT, THEN, ARE THE POLICY IMPLICATIONS OF ALL THESE DATA?

I THINK THE FACTS ARE CONVINCING ENOUGH BY NOW TO ENCOURAGE US TO TRY TO REACH THAT GOAL OF A SMOKE-FREE SOCIETY WITHIN THE NEXT 12 YEARS...OR AT LEAST COME VERY, VERY CLOSE.

TO DO THAT WE SHOULD CLARIFY AND STRENGTHEN THE 4-ELEMENT STRATEGY THAT HAS WORKED SO WELL IN OUR COUNTRY UP TO NOW. THEY ARE RESEARCH, EDUCATION, ECONOMICS, AND NON-SMOKER MILITANCY.

THE FIRST AND PRINCIPLE ELEMENT IS RESEARCH. THE ANTI-SMOKING PROGRAM IS, AFTER ALL, A PUBLIC HEALTH PROGRAM. AS SUCH, IT REQUIRES A FIRM BASIS IN SCIENCE. WE HAVE SUCH A BASE ALREADY, AS I MENTIONED EARLIER, BUT WE NEED TO EXPAND IT WITH NEW BIOMEDICAL AND BIOBEHAVIORAL DATA.

THIS IS EXACTLY WHAT WE'RE DOING IN THE UNITED STATES, AS PART OF OUR OVERALL NATIONAL RESEARCH AGENDA, AND WHAT MOST OF THE DEVELOPED NATIONS OF THE WORLD ARE DOING AS WELL.

CIGARETTE RESEARCH HAS VIRTUALLY BECOME AN INDUSTRY UNTO ITSELF.

THE SECOND ELEMENT IS PUBLIC EDUCATION.

SMOKING IS A SPECIFIC HUMAN BEHAVIOR...AND EDUCATION IS THE ONLY SURE WAY TO CHANGE HUMAN BEHAVIOR OVER THE LONG TERM. THE ANTI-SMOKING CAMPAIGNS PUT ON THUS FAR BY BOTH PUBLIC AND PRIVATE AGENCIES HAVE BEEN VERY EFFECTIVE AND OUGHT TO BE CONTINUED. IT MAKES GOOD POLICY SENSE TO CONTINUE THEM ON AN EVEN LARGER SCALE, IF RESOURCES PERMIT.

I THINK ONE EXCELLENT ASPECT OF THE NEWEST EDUCATION CAMPAIGNS IS THE EMPHASIS ON THE FACT THAT SMOKING NOT ONLY CAUSES LUNG CANCER -- WE ALREADY KNOW THAT -- BUT THE RESEARCH HAS ALSO SHOWN THAT CIGARETTE SMOKING IS ALSO THE PRINCIPAL CAUSE OF LARYNGEAL CANCER...A MAJOR CAUSE OF ORAL AND ESOPHAGEAL CANCERS...AND A SIGNIFICANT CONTRIBUTORY FACTOR IN THE DEVELOPMENT OF HEAD, NECK, BLADDER, KIDNEY, STOMACH, AND PANCREATIC CANCERS.

THIS, OF COURSE, IN ADDITION TO THE INFORMATION THAT SMOKING ALSO CAUSES OTHER KINDS OF HAVOC IN THE LUNGS -- EMPHYSEMA AND CHRONIC BRONCHITIS, FOR EXAMPLE -- AND IS ASSOCIATED WITH MANY KINDS OF DAMAGE TO THE DEVELOPING FETUS.

WHAT DO WE HOPE TO ACHIEVE THROUGH THESE EDUCATION CAMPAIGNS?



ACTUALLY, WE'VE SET SOME GOALS FOR OURSELVES. WE HOPE, FOR EXAMPLE, TO ACHIEVE A 50 PERCENT REDUCTION IN THE CANCER MORTALITY RATE BY THE YEAR 2000. THIS MEANS REDUCING -- ALSO BY 50 PERCENT -- THE LEVEL OF SMOKING IN OUR COUNTRY.

IT ALSO MEANS BETTER DIET -- LES FAT AND MORE FIBER -- AS WELL AS IMPROVED SCREENING AND CANCER DETECTION PROGRAMS AND, OF COURSE, CONTINUED IMPROVEMENT IN CANCER THERAPIES.

BUT THE KEY TO A MAJOR REDUCTION IS TO CUT THE RATE OF SMOKING. AND THAT CAN ONLY BE ACHIEVED THROUGH EDUCATION...EDUCATION...AND MORE EDUCATION.

THE THIRD ELEMENT OF OUR NATIONAL STRATEGY IS ECONOMIC. WHEN YOU RAISE THE COST OF A PACK OF CIGARETTES, YOU LOWER THE RATE OF CIGARETTE CONSUMPTION. IT'S THAT SIMPLE.

A 10 PERCENT INCREASE IN THE PRICE OF A PACK OF CIGARETTES, FOR EXAMPLE, WILL TRANSLATE INTO A 4 PERCENT DECREASE IN CIGARETTE CONSUMPTION AMONG ADULTS AND A 14 PERCENT DECREASE AMONG ADOLESCENTS.

LAST YEAR, THE UNITED STATES CONGRESS RAISED THE TAX ON CIGARETTES AND WILL DO SO AGAIN.

MEANWHILE, INDIVIDUAL STATE GOVERNMENTS ARE ADDING A FEW CENTS OF THEIR OWN ON TOP OF THAT. THAT ALSO IS AN IRREVERSIBLE TREND.

ANOTHER ASPECT OF THIS ECONOMIC FACTOR IS THE SAVINGS THAT EMPLOYERS MAY REALIZE IF THEIR EMPLOYEES DO NOT SMOKE. AND THIS IS AN ASPECT THAT I PERSONALLY HAVE BEEN EXPANDING ON WITH MANY AUDIENCES OF BUSINESSMEN AROUND THE UNITED STATES.

IF A COMPANY INSTITUTES A "SMOKE-FREE" POLICY AMONG ITS EMPLOYEES OR ON ITS PREMISES, THEY WILL DISCOVER THAT THEIR FIRE INSURANCE PREMIUMS WILL BE LOWER...THEIR FLEET AUTO INSURANCE BECOMES CHEAPER...THEIR HEALTH INSURANCE PREMIUMS WILL ALSO GO DOWN...THE RATES FOR EMPLOYEE ABSENTEEISM WILL TEND TO DECLINE, WHILE PRODUCTIVITY RATES WILL TEND TO GO UP...AND SO ON.

ALSO, WE HAVEN'T SEEN THE LAST OF THE PRODUCT LIABILITY CASES AGAINST THE CIGARETTE INDUSTRY. IN FACT, ABOUT 100 SUCH CASES ARE NOW BEFORE THE COURTS. AND EACH PLAINTIFF IS ASKING FOR A LARGE CASH SETTLEMENT...NOTHING LESS THAN A MILLION DOLLARS, AND SOME MANY ITMES THAT MODEST AMOUNT.

THE SHEER COST OF DEFENDING AGAINST THIS MANY PLAINTIFFS IN COURTS ALL ACROSS THE UNITED STATES IS PROBLEM ENOUGH FOR THE TOBACCO INDUSTRY. ADD TO THAT THE POSSIBILITY OF LOSING ANY ONE OF THEM, AND YOU HAVE THE MAKINGS OF AN INDUSTRY NIGHTMARE. A PRODUCT LIABILITY JUDGMENT AGAINST CIGARETTES WOULD BE AN ENORMOUS ECONOMIC BLOW TO THE CIGARETTE INDUSTRY.

AND I BELIEVE THAT JUST SUCH A JUDGMENT WILL COME TO PASS.

SO MUCH FOR THE ECONOMICS OF THE ANTI-SMOKING STRATEGY.

THE FOURTH ELEMENT IS THE RISING MILITANCY OF THE NON-SMOKER. THE TOBACCO INDUSTRY ITSELF HAS COME TO RECOGNIZE THE MILITANT NON-SMOKER AS THE MOST SERIOUS THREAT TO THE INDUSTRY SINCE THE FIRST SURGEON GENERAL'S REPORT IN 1964.

NON-SMOKERS, CONCERNED ABOUT RISKS TO THEIR OWN HEALTH PRESENTED BY OTHER PEOPLE WHO SMOKE, ARE THE ONES WHO ARE DEMANDING -- AND GETTING -- THE NO-SMOKING ORDINANCES, REGULATIONS, AND LAWS THAT ARE GOING INTO EFFECT DAILY ALL ACROSS THE UNITED STATES.

THIS IS SERIOUS BUSINESS. HENCE, THE TOBACCO INDUSTRY IS TRYING TO FIGHT BACK. IT HAS MOUNTED A COSTLY PROPAGANDA EFFORT TO CONVINCE THE WORLD THAT SMOKERS HAVE SOME SORT OF CONSTITUTIONAL "RIGHT TO SMOKE," WHICH IS AN ABSOLUTELY PREPOSTEROUS AND INTELLECTUALLY BANKRUPT IDEA.

COULD ANYONE HONESTLY BELIEVE THAT SMOKING A CIGARETTE IS ON A PAR WITH VOTING...SPEAKING YOUR MIND...OR WORSHIPPING GOD?

THE TOBACCO INDUSTRY WOULD SAY "YES."

AND THEY OUGHT TO BE ASHAMED OF THEMSELVES.

IN ANY CASE, STATE AND LOCAL GOVERNMENTS ARE RESPONDING WITH THE CLEAR MESSAGE THAT THE SO-CALLED "RIGHTS" OF SMOKERS END WHEN THEIR ADDICTION AFFECTS THE HEALTH AND WELL-BEING OF OTHER PEOPLE WHO DON'T SMOKE. AND THAT'S ALL THERE IS TO IT.

SO FAR, MORE THAN 40 STATES, THE DISTRICT OF COLUMBIA, AND HUNDREDS OF COMMUNITIES HAVE LAWS PROHIBITING SMOKING IN PUBLIC BUILDINGS AND ALL FORMS OF PUBLIC TRANSPORTATION...IN RESTAURANTS...RETAIL STORES...SPORTS ARENAS...THEATERS...AND MANY OTHER PUBLIC PLACES.

AND 9 STATES HAVE LAWS THAT RESTRICT SMOKING BY EMPLOYEES OF THE PRIVATE SECTOR.

I'M PLEASED TO SAY THAT OUR DEPARTMENT OF HEALTH AND HUMAN SERVICES BECAME VIRTUALLY SMOKE-FREE AS OF JULY 1, WHEN THE NEW NO-SMOKING REGULATIONS TOOK EFFECT IN ALL OUR FACILITIES...OFFICES, LABORATORIES, CLINICS, AND SO ON.

ONE STATE -- MINNESOTA -- HAS A LAW THAT SAYS YOU CAN'T SMOKE IN ANY PUBLIC PLACE UNLESS THERE'S A SIGN POSTED THAT SAYS YOU MAY.

THOSE, THEN, ARE THE FOUR ELEMENTS THAT ARE SHAPING OUR NATIONAL POLICY IN REGARD TO SMOKING: RESEARCH...EDUCATION...ECONOMICS ...AND THE MILITANCY OF THE NON-SMOKER. TOGETHER THEY FORM A STRATEGY THAT HAS BEEN SUCCESSFUL OVER THE PAST 20 YEARS. AND I BELIEVE THEY WILL CONTINUE TO WORK FOR US, AS WE FORGE AHEAD TO OUR GOAL OF BEING A SMOKE-FREE SOCIETY BY THE YEAR 2000.

I'M VERY OPTIMISTIC, OF COURSE...BUT I'M NOT NAIVE. THE TOBACCO INDUSTRY IS A FORMIDABLE OPPONENT. IT IS POURING MONEY INTO PRINT ADVERTISING...BILLBOARDS...CULTURAL EVENTS...SPORTS EVENTS...YOU NAME IT. THE LAST FIGURES I HAVE INDICATE THAT THE INDUSTRY SPENDS MORE THAN \$2 BILLION A YEAR ON ADVERTISING AND PROMOTION...OR ABOUT \$8 FOR EVERY MAN, WOMAN, AND CHILD IN THE UNITED STATES.

WE DON'T ALLOW CIGARETTES TO BE ADVERTISED ON RADIO AND TELEVISION. THIS YEAR, WE BEGAN THE DEBATE OVER WHETHER CIGARETTES SHOULD BE ADVERTISED...AT ALL.



I WAS INVITED BY THE CONGRESS TO GIVE MY OWN VIEWS ON THE MATTER AND I HAVE SAID THAT I THINK ALL CIGARETTE ADVERTISING SHOULD BE BANNED.

THERE IS STILL MUCH TO BE SAID ON BOTH SIDES, I AM TOLD. BUT I BELIEVE THE DAYS OF THE INDUSTRY ARE NUMBERED AND NO AMOUNT OF ADVERTISING IS GOING TO CHANGE THAT FACT.

BUT, AS I INDICATED BEFORE, THAT'S NO REASON TO BE SMUG. THE INDUSTRY IS STILL CAPABLE OF DOING MUCH MISCHIEF WITH THE HEALTH OF YOUNG PEOPLE, WOMEN, BLUE-COLLAR WORKERS, AND MINORITIES...ALL OF WHOM MAKE UP THE BULK OF THE REMIANING 53 MILLION OR SO SMOKERS IN THIS COUNTRY.

WE MAY BE UPSET AT THEM FOR CONTINUING TO SMOKE..BUT THAT'S NO REASON TO ABANDON THEM. AND I, FOR ONE, CANNOT DO THAT, AND I ASK ASK EACH AND EVERY ONE OF YOU TO REMAIN IN THE FIGHT TO RID OUR SOCIETY OF CIGARETTES BY THE END OF THE CENTURY.

I KNOW WE CAN DO IT. AND I WANT TO ASSURE YOU THAT THE U.S. PUBLIC HEALTH SERVICE AND ITS SURGEON GENERAL -- I AND WHOEVER ELSE COMES AFTER ME -- WILL DO WHATEVER WE CAN TO MAKE THAT DREAM OF A SMOKE-FREE SOCIETY COME TRUE.

I INTEND TO LEAVE FOR MY SUCCESSOR NOT JUST THE 13 SMOKING-AND-HEALTH REPORTS THAT I FOUND, BUT THE ADDITIONAL 3 REPORTS THAT WILL BE MY CONTRIBUTION TO THIS COUNTRY'S LIFE-SAVING CAMPAIGN AGAINST CIGARETTES.

AND I WILL ALSO LEAVE A NOTE INVITING THAT PERSON TO PLEASE CONTINUE THE TRADITION.

THANK YOU.

# # # # #